**NATIONAL ASSEMBLY  
TUESDAY, 10 MAY**   
***MINI PLENARIES (VIRTUAL)***   
**14:00 – 16:15**

**(2) Vote 33: Human Settlements**

**BUDGET VOTE 33: HUMAN SETTLMENTS**

**HON. PRINCESS SA BUTHELEZI, MP**

Hon. Speaker,

Shelter is a basic human need, necessary for survival. Our Constitution, in Section 26 of the Bill of Rights, states that “Everyone has the right to have access to adequate housing”, and further, that “The state must take reasonable legislative and other measures, within its available resources, to achieve the progressive realisation of this right.”

This task – providing access to adequate housing for those in need - has proved challenging to the government of the day. According to NGO, the Development Action Group, the “national housing backlog sits at an estimated 2.6 million houses, that is, 12 million people in desperate need of decent accommodation.”

Therefore, the importance of the work of the Department of Human Settlements, and the prudent use of the budget allocated to its work, cannot be overstated.

As we gather today, this budget is under additional pressures: not only due to the impact of the Covid-19 pandemic, but also, more recently, the devastating floods which left thousands of people in KwaZulu-Natal without any form of shelter.

The lofty – and necessary - ideals dictated by the National Development Plan, that “by 2030, measurable progress towards breaking apartheid spatial patterns would have been made”, as well as the “issue of transformation in the housing sector”, face almost insurmountable setbacks as we are forced to look to diverting funds to provide emergency relief to communities in need.

As the IFP, we therefore welcome the overall budget allocation, which increased by R1.34 billion, from R31.67 billion in 2021/22, to R33.02 billion in 2022/23.

However, the Department’s revised five-year MTSF targets must be noted: “300 000 Breaking New Ground (BNG) houses delivered, and 20 000 households that received financial assistance and purchased units through the Finance Linked Individual Subsidy Programme (FLISP)”. Additionally, “300 000 serviced sites delivered, 18 000 rental housing units delivered in priority development areas (PDAs) [and] 5 000 Community Residential Units (CRU) delivered.”

Considering the sheer scale of the task at hand, we must pose the question: are the MTSF targets ambitious enough?

As the IFP, we therefore echo the concern and recommendation of the Committee with regards to blocked projects: with so many people in need of housing, it is unacceptable that projects have been blocked; also, the Committee has asked for budgets and timeframes – we would further like to suggest detailed feedback be provided on such projects. Surely, there was budget allocated already to these projects? If so, there must be no duplication and no room for mismanagement of these funds.

The issue of the housing beneficiary lists is further of the utmost importance. The slow pace of the digitisation of these lists is unacceptable, and leaves this process open to manipulation on the part of unscrupulous individuals. As the IFP, we are further in full agreement with the Committee, that “The beneficiary list or allocation policy should prioritise child headed households, the elderly, and people with disabilities.”

We further wish to make mention of the importance of cooperation between the three spheres of government – national, provincial, and municipal – needed to achieve results and provide our people with decent housing. This is not the time to play politics – the people must come first.

As the IFP, where we govern, we are committed to the principle of servant leadership, and good governance, free of corruption. As long as provincial and national government show a visible commitment to the same, and to avoiding irregular, as well as fruitless and wasteful expenditure, we are willing to work together to ensure decent housing for all.

The IFP supports the Budget Vote.

**(3) Vote 18: Health**

**BUDGET VOTE 18: HEALTH**

**MRS MD HLENGWA, MP**

Honourable Chairperson,

Healthcare in our country finds itself at an extremely difficult point. Even before the advent of Covid-19, our public health resources and infrastructure were not equal to the task of health provision in the country. In every respect, South Africa remains unequal in the provision of healthcare, which is a universal and constitutional human right.

In addition to these pressures, our healthcare services must contend with several regional and global challenges, such as illegal foreign nationals, escalating humanitarian emergencies, climate change and environmental degradation.

Most importantly, we are not over the Covid-19 crisis, and as we are about to enter this winter season, we are already noticing an upwards movement in respect of positive Covid cases. This will place our public healthcare system under renewed stress, which may last for the next decade, and which is why it is very important that we build a resilient and effective healthcare system.

As a part of this resilience building, we must ensure not only human resources such as our medical professionals, doctors and nurses but also medical equipment equity in all areas of South Africa. Why does the HPCSA still make it so difficult for our foreign qualified medical doctors to enter professional medical practice in South Africa, given that we currently have vacant posts for 1 339 doctors? What are we doing to prevent our medical professionals from leaving South Africa to practice medicine in other countries? We have 10800 vacancies for nurses. Why are there shortages of medical cancer treatment in our rural areas? Why do our public hospitals continuously run out of necessary consumables, like anti-bacterial cleaning products or do not even have hot water, or, in some cases – any water at all?

In such uncertain times, why do we not have sufficient capacity in respect of mental healthcare facilities? And why are not using this period when we are all so heavily reliant on technology, to medically innovate in the healthcare field? How are we improving our public healthcare ICT capacity and what are we doing in order to ensure that all of our hospitals and clinics have alternative electricity capacity, as I think we can all agree that Eskom has truly failed us and it is only going to get worse.

Chairperson, audit outcomes of KwaZulu-Natal and the Northern Cape provinces require immediate intervention, as there has been little or no improvement over the past five years by these health departments, whose audits remain ‘qualified’. Unauthorised expenditure, and fruitless and wasteful expenditure are highest in the Eastern Cape and Gauteng. Why is this so? Let me tell you, Chairperson: it is because there is no consequence management. Departmental officials can do as they please and disregard tender and procurement regulations.

It is criminal that health infrastructure projects are delayed due to mismanagement, and poor oversight and project management, especially given the unequal distribution of healthcare infrastructure in our rural areas.

In conclusion, Honourable Chairperson, healthcare equity must be prioritised by this government, and the digital transformation of the public healthcare system must be embraced in order to innovate, transform and build resilience into the sector.

Universal access to healthcare must be available to all South Africans and the NHI must be implemented in a model that is financially sustainable and achievable.

The IFP supports the Budget Vote.

I thank you.

**(4) Vote 36: Small Business Development**

**BUDGET VOTE 36: SMALL BUSINESS DEVELOPMENT**

**HON. INKOSI BN LUTHULI, MP**

Hon. Speaker,

Small business is a key driver of our economy and employment, and deserves - and needs - the dedicated support of government.

And, it is not just the IFP that emphasises the importance of small business when it comes to job creation: according “Small Matters” a 2019 study by the International Labour Organisation (ILO), which included data from South Africa, “in almost all of the 99 countries in the sample, the self-employed and micro- and small enterprises (i.e. small economic units) make up more than two-thirds of employment.”

This being said, we would like to remind government of its commitment, through the Department of Small Business Development, “to focus on enhanced support to small business and cooperatives, with an emphasis on programmes to advance entrepreneurship amongst women, the youth, and people with disabilities to contribute to job creation and economic growth.”

As our country attempted to slowly pick up the pieces in the wake of the crippling Covid-19 pandemic, we were knocked sideways in July 2021 by the destructive unrest in KwaZulu-Natal and Gauteng. According to the South African Special Risks Insurance Association (Sasria), “damage in July’s looting and mayhem, the most expensive riots in the world … cost more than R50 billion”.This was followed by yet more devastation in 2022, with the flooding in KwaZulu-Natal and the Eastern Cape. Not only lives were lost, but businesses and livelihoods destroyed.

As the IFP, we are concerned.

According to National Treasury, “Real GDP is expected to grow by 2.1 per cent in 2022 and average 1.8 per cent over the medium term.” This limited economic growth rate does not bode well for South Africa as a whole, and small businesses in particular.

This is why the budget allocated to the Department of Small Business Development must work harder, and give beneficiaries more ‘bang for their buck’. We cannot afford a single cent to go to waste through irregular, or fruitless and wasteful expenditure. Any opportunities for corruption must also be identified and prevented – before losses occur.

As the IFP, we further have concerns that we believe merit the attention of this House. The first is the merger of the Small Enterprise Finance Agency (Sefa) and the Small Enterprise Development Agency (Seda), which were to be consolidated with the Co-operatives Banks Development Agency (CBDA) into a single agency. According to the Report, “The merger was initially set to be effective from 1 April 2022. Nevertheless, on 6 April 2022, Cabinet approved a 20-month extension period”.

What are the repercussions of this delay for the people that rely on these agencies? We would like the assurance of the Minister that beneficiaries will not suffer due to this delay. We also agree with the Committee in their concern over the Seda budget, which is “projected to register negative growth rate” between 2019 and 2025.

In addition, although we echo the Committee in welcoming “the appointment of Mr Sipho Nkosi …to assist the government eliminate red tape”, we are concerned that apart from the announcement by the President during the 2022 SONA, there appears to be little movement on this ‘Red Tape Reduction Unit’, which was supposed to be housed within the Presidency. We therefore request an update on the progress made on the establishment of this Unit, as well as an Annual Performance Plan indicating the scope of its work.

The IFP supports the Budget Vote.